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PTO/SB/21 (09-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	36	Attorney Docket Number	7146.0084
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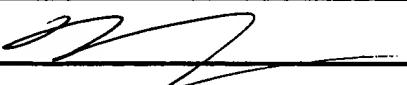
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Acknowledgment Card PTO/SB/08B References AA - AE
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Remarks

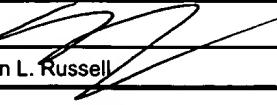
The Commissioner is hereby authorized to charge any additional fees, or credit any overpayment, to Deposit Account No. 03-1550

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Chernoff, Vihauer, McClung & Stenzel, LLP		
Signature			
Printed Name	Kevin L. Russell		
Date	September 13, 2005	Reg. No.	38,292

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Kevin L. Russell
Date	September 13, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT APPLICATION EXAMINING OPERATIONS**

Applicant: Jagtar Singh Saroya
Serial No: 09/773,396
Filed: January 31, 2001
Title: WAVE PLATE MOUNTING

Group Art Unit: 2872

Examiner: Alessandro V. Amari
Our Docket: 7146.0084

**INFORMATION DISCLOSURE STATEMENT
IN ACCORDANCE WITH 37 CFR §1.98**

Chernoff, Vilhauer, McClung & Stenzel, LLP
1600 ODS Tower
601 S.W. Second Avenue
Portland, Oregon 97204-3157

September 13, 2005

Mail Stop Amendment (IDS--FEE)
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith copies of publications of which he is aware and which he desires to have considered by the Patent Office in accordance with 37 CFR §1.97. In accordance with 37 CFR §1.97(b)(3), this Information Disclosure Statement is being submitted after the mailing date of a first Office Action on the merits of the above-identified application. Accordingly we enclose the required fee of \$180.

09/16/2005 ZJUHAR1 00000016 09773396

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In accordance with 37 CFR §1.97(h), the filing of this Information Disclosure Statement will not be regarded as an admission that any patent or publication or combination of patents referred to herein is, or is considered to be, material to patentability under 37 CFR §1.56(b) unless specifically designated as such.

Enclosed herewith is Form PTO/SB/08 listing the enclosed references. Applicant would respectfully request that the Examiner initial this form, where indicated, and return an acknowledgment copy to the applicant to confirm that the listed references were received and considered.

The person making this statement is the attorney who signs below on the basis of the information supplied by the inventor and the information in his file.

Respectfully submitted,



Kevin L. Russell
Reg. No. 38,292
Attorney for Applicant
Tel: (503) 227-5631

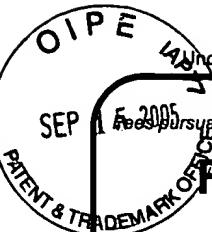
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Dated: September 13, 2005



Kevin L. Russell



FEES TRANSMITTAL for FY 2005

Effective on 12/08/2004.

Fees Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Complete If Known

Application Number	09/773,396
Filing Date	January 31, 2001
First Named Inventor	Jagtar Singh Saroya
Examiner Name	Alessandro V. Amari
TOTAL AMOUNT OF PAYMENT	(\$) 180.00
Art Unit	2872
Attorney Docket No.	7146.0084

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify) : _____
- Deposit Account Deposit Account Number: 03-1550 Deposit Account Name: Chernoff, Vilhauer, McClung & Stenzel

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity
_____ - 20 or HP = _____	x _____	= _____	Fee (\$)	Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____ - 3 or HP = _____	x _____	= _____	Fee (\$)	Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	38,292	Telephone	(503) 227-5631
Name (Print/Type)	Kevin L. Russell			Date	September 13, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet

1

of

1

Complete if Known

Application Number	09/773,396
Filing Date	January 31, 2001
First Named Inventor	Jagtar Singh Saroya
Art Unit	2872
Examiner Name	Alessandro V. Amari
Attorney Docket Number	7146.0084

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		T ²
	AA	KITAMURA, "A SOCKS-based IPv6/IPv4 Gateway Mechanism," Network Working Group, April 2001		
	AB	LEE et al., "Dual Stack Hosts Using 'Bump-in-the-API' (BIA)," Network Working Group, October 2002		
	AC	TSUCHIYA et al., "Dual Stack Hosts using the 'Bump-In-the-Stack' Technique (BIS)," Network Working Group, February 2000		
	AD	AFIFI et al., "Methods for IPv4-IPv6 Transition," XP-010555073, July 6, 1999, pp. 478-484.		
	AE	LEECH et al., "SOCKS Protocol Version 5," XP-002198150, March 1996, pp. 1-9.		

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.